

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: PAPER-BASED INTERFACE FOR SPECIFYING
RANGES

Attorney Docket Number:: 015358-006520US

Request for Early Publication:: No

Request for Non-Publication:: Yes

Suggested Drawing Figure:: 24

Total Drawing Sheets:: 34

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jamey
Middle Name::
Family Name:: Graham
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1196 Shasta Avenue
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95126

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Gregory
Middle Name:: J.
Family Name:: Wolff
Name Suffix::
City of Residence:: Redwood City
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 560 California Way
City of Mailing Address:: Redwood City
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94062

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jonathan
Middle Name:: J.
Family Name:: Hull
Name Suffix::
City of Residence:: San Carlos
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 751 Laurel Street PMB 434
City of Mailing Address:: San Carlos
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94070

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/175,540	06/18/02
This Application	Continuation-in-part of	10/001,895	11/19/01

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::